_ PART B - FEE(S) TRANSMITTAL

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32172 7590 01/08/2008

NEW YORK, NY 10036-2714

EXAMINER

APPLN. TYPE

nonprovisional

DICKSTEIN SHAPIRO LLP 1177 AVENUE OF THE AMERICAS (6TH AVENUE)

SMALL ENTITY

YES

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TOTAL FEE(S) DUE

\$1020

DATE DUE

04/08/2008

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/808.121 03/24/2004 Joseph S.M. Peiris V9661.0069 2460

PUBLICATION FEE DUE

\$300

CLASS-SUBCLASS

TITLE OF INVENTION: NOVEL HUMAN VIRUS CAUSING SEVERE ACUTE RESPIRATORY SYNDROME (SARS) AND USES THEREOF

ISSUE FEE DUE

\$720

ART UNIT

HUMPHREY, LOUISE WANG ZHIYING 1648	536-023100	
1. Change of correspondence address or indication of "Fee Address" (3' CFR 1.55). Change of correspondence address (or Change of Correspondence Address form FT/OSH 22) attached. "Fee Address" indication (or 'Fee Address' Indication form FT/OSH 47; Rev 03-102 or more recent) attached. Use of a Custome Number is required.	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to	DICKSTEIN SHAPIRO LLP 2 3
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED O PLEASE NOTE: Unless an assignee is identified below, no assigne condition as set forth in 37 CFR 3.11. Completion of this form is (A) NAME OF ASSIGNEE THE University of Hong Please check the appropriate assignee category or categories (will not be	nee data will appear on the patent. If an assignce is identified to the patent of the patent. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Hory Hory	ed below, the document has been filed for Kong other private group entity Government
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